ROLLING MEADOWS NURSING & REHAB CTR

1155 S MILITARY RD

FOND DU LAC 549	937 Phone: (920) 929-3585		Ownership:	County
Operated from 1/1 7	To 12/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction	on with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up	and Staffed (12/31/04):	100	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Ca	apacity (12/31/04):	100	Title 19 (Medicaid) Certified?	Yes
Number of Residents of	on 12/31/04:	77	Average Daily Census:	79

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	.2/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	36.4
Supp. Home Care-Personal Care	No					1 - 4 Years	29.9
Supp. Home Care-Household Services	No	Developmental Disabilities	2.6	Under 65	9.1	More Than 4 Years	33.8
Day Services	No	Mental Illness (Org./Psy)	46.8	65 - 74	11.7		
Respite Care	Yes	Mental Illness (Other)	9.1	75 - 84	32.5		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	42.9	***********	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.9	Full-Time Equivalent	:
Congregate Meals	No	Cancer	1.3			Nursing Staff per 100 Res	sidents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)	
Other Meals	No	Cardiovascular	6.5	65 & Over	90.9		
Transportation	No	Cerebrovascular	3.9			RNs	12.8
Referral Service	No	Diabetes	2.6	Gender	용	LPNs	13.9
Other Services	Yes	Respiratory	0.0			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	27.3	Male	46.8	Aides, & Orderlies	48.9
Mentally Ill	No			Female	53.2		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

		edicare itle 18			Medicaid 'itle 19			Other			Private Pay	2		Family Care			anaged Care	l		
Level of Care	No.	્ર	Per Diem (\$)	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	5	100.0	306	45	93.8	116	3	100.0	116	18	100.0	141	3	100.0	116	0	0.0	0	74	96.1
Intermediate				3	6.3	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	3.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		48	100.0		3	100.0		18	100.0		3	100.0		0	0.0		77	100.0

ROLLING MEADOWS NURSING & REHAB CTR

Admissions, Discharges, and		Percent Distribution	n of Residents'	Conditi	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
				Ş	% Needing		Total
Percent Admissions from:		Activities of	8	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	15.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	4.2	Bathing	1.3		61.0	37.7	77
Other Nursing Homes	9.7	Dressing	6.5		64.9	28.6	77
Acute Care Hospitals	66.7	Transferring	19.5		51.9	28.6	77
Psych. HospMR/DD Facilities	1.4	Toilet Use	15.6		42.9	41.6	77
Rehabilitation Hospitals	0.0	Eating	35.1		49.4	15.6	77
Other Locations	2.8	******	* * * * * * * * * * * * * * *	*****	* * * * * * * * * * * * * * * * * *	*******	******
Total Number of Admissions	72	Continence		%	Special Treatmen	ts	왕
Percent Discharges To:		Indwelling Or Extern	nal Catheter	16.9	Receiving Resp	iratory Care	13.0
Private Home/No Home Health	11.1	Occ/Freq. Incontiner	nt of Bladder	59.7	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	13.6	Occ/Freq. Incontiner	nt of Bowel	50.6	Receiving Suct	ioning	0.0
Other Nursing Homes	2.5				Receiving Osto	my Care	0.0
Acute Care Hospitals	17.3	Mobility			Receiving Tube	Feeding	1.3
Psych. HospMR/DD Facilities	1.2	Physically Restraine	ed	7.8	Receiving Mech	anically Altered Diets	50.6
Rehabilitation Hospitals	0.0						
Other Locations	9.9	Skin Care			Other Resident C	haracteristics	
Deaths	44.4	With Pressure Sores		11.7	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		7.8	Medications		
(Including Deaths)	81				Receiving Psyc	hoactive Drugs	59.7

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Gov	ernment	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8	િ	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	79.0	87.2	0.91	86.9	0.91	87.7	0.90	88.8	0.89
Current Residents from In-County	84.4	54.3	1.55	80.4	1.05	70.1	1.20	77.4	1.09
Admissions from In-County, Still Residing	29.2	25.2	1.16	23.2	1.26	21.3	1.37	19.4	1.50
Admissions/Average Daily Census	91.1	55.2	1.65	122.8	0.74	116.7	0.78	146.5	0.62
Discharges/Average Daily Census	102.5	59.6	1.72	125.2	0.82	117.9	0.87	148.0	0.69
Discharges To Private Residence/Average Daily Census	25.3	21.2	1.20	54.7	0.46	49.0	0.52	66.9	0.38
Residents Receiving Skilled Care	96.1	87.1	1.10	96.9	0.99	93.5	1.03	89.9	1.07
Residents Aged 65 and Older	90.9	87.7	1.04	92.2	0.99	92.7	0.98	87.9	1.03
Title 19 (Medicaid) Funded Residents	62.3	77.9	0.80	67.9	0.92	68.9	0.90	66.1	0.94
Private Pay Funded Residents	23.4	16.8	1.39	18.8	1.24	19.5	1.20	20.6	1.14
Developmentally Disabled Residents	2.6	0.5	5.55	0.6	4.14	0.5	5.27	6.0	0.43
Mentally Ill Residents	55.8	46.5	1.20	37.7	1.48	36.0	1.55	33.6	1.66
General Medical Service Residents	27.3	21.0	1.30	25.4	1.07	25.3	1.08	21.1	1.29
Impaired ADL (Mean)	57.7	44.6	1.29	49.7	1.16	48.1	1.20	49.4	1.17
Psychological Problems	59.7	66.5	0.90	62.2	0.96	61.7	0.97	57.7	1.04
Nursing Care Required (Mean)	10.6	8.7	1.22	7.5	1.41	7.2	1.46	7.4	1.42